

## REVIEWS OF BOOKS.

---

BRAIN SURGERY. By M. ALLEN STARR, M.D., Ph.D. 8vo., 295 pages. New York: William Wood & Co., 1893.

ALTHOUGH by its title one would classify this book with those intended for surgeons only, the work is really of chief value to the general practitioner, who from time to time may have under his observation patients who are suffering from some one of the various forms of brain disease in which the question of operative interference arises. Few men have the time to read such elaborate treatises as those of Gowers or Hirt, but in this book by Starr (together with his book on Nervous Diseases), it is possible to go over the entire subject quickly, and arrive at a satisfactory diagnosis. In the operative domain of nervous diseases, especially in those operations which have to do with the brain, the best literature upon the subject is scattered widely through various medical publications at home and abroad, and this, as the author says in his preface, "is accessible to those only who have a large medical library at their disposal, and who have the time for literary research."

The diagnosis is of primary importance, and is essential before surgical treatment is attempted. The first chapter of the book is devoted to the diagnosis of the nature of the cerebral lesion, of its situation and of the essential facts of localization. Cerebro-cranial topography is fully discussed, and the illustrations given add greatly to the value of the text itself.

Under surgery proper the operation of trephining for the relief of epilepsy, imbecility due to microcephalus, cerebral haemorrhage, abscess of the brain, tumor of the brain, hydrocephalus, intra-cranial pressure, insanity and headache are each made the subject of a chap-

ter. Each chapter gives reports of cases, for the most part those of American surgeons. Those coming under the writer's own observation, and referred to some surgeon for operation, are especially valuable on account of the accurate and complete history of the localization symptoms, and the conclusions derived therefrom, which are given.

Trephining for epilepsy is the subject given the greatest amount of space. The varieties of the disease, including the various forms of attack (motor, sensory, aphasic and psychical), noticed in cases of the Jacksonian type, are briefly discussed. Traumatic epilepsy is more elaborately treated, and numerous cases cited, with a diagram of the opening made in the skull in nearly every instance. Unfortunately for the value of these statistics, the cases are nearly all so recent as to materially detract from the conclusions as to the final result. Of thirteen cases conducted under the personal observation of the author, only three are claimed as cures. Examination of the detailed reports reduces these cases to two, Cases I and V, the first of which has a post-operative history of but four months, and the second of but three months. The pathology of some of these cases, as worked out and illustrated by Dr. Van Gieson, is interesting and instructive, the conclusion being that Jacksonian and traumatic epilepsy are always due to a pathological change in the brain. The summary of the conclusions drawn is that a majority of chances are against cure as a result of operative interference, but as it is the only method of treatment which affords any hope whatever, and as it is a method which is fairly safe, operative attack is justifiable.

The results shown in trephining for traumatic haemorrhage (non-traumatic haemorrhages being very seldom open to an operation), and for brain abscesses following injury, or otitis media, are more satisfactory, providing the localization symptoms are recognized and the site of the lesion is clear. In case a brain tumor is the cause of the disturbance, much can be learned from the analysis of 600 tumors which Dr. Starr gives. The importance of purely mental symptoms which may arise is well illustrated by a case of a sarcoma of the left

frontal lobe, which was localized and removed by Starr and McBurney.

For those practitioners, who by force of circumstances are expected to be proficient in all departments of medicine, the last chapter, devoted to the operation of trephining, is likely to prove the most valuable in the book. It has been revised by Dr. McBurney, and the technique, which is minutely described, is the result of the most recent advances in this realm of surgery.

H. P. DEFOREST, M.D. (Brooklyn).

LESSONS IN PHYSICAL DIAGNOSIS. By ALFRED L. LOOMIS, M.D., LL.D. Tenth edition, revised and enlarged. 8vo., 240 pages. New York: William Wood & Company.

This book upon Physical Diagnosis by Dr. Loomis is too well and favorably known to need any detailed description as to its scope and character. The tenth edition has just appeared, and in the prefatory note the author says that it has been thoroughly revised. Upon careful examination, however, one regrets that the revision has not been more complete, and that a book which has so many good qualities should also have so many glaring defects. When it is compared with a work like the recent one by Wesener, upon the same subject, and designed for the same purpose, *i.e.*, a complete and concise guide for both student and practitioner, the inferior quality of Dr. Loomis' book is all the more apparent.

The main portion of the book is devoted to the physical examination of the thoracic viscera, and here the author appears to the best advantage. His style is concise, his opinions positive.

In the other chapters the same high standard is not maintained. To point out in detail all of the errors and omissions is undesirable, yet some of them should certainly be mentioned. The chief subject which one would naturally expect to find in such a work, and which is omitted, is physical diagnosis as applied to the more common forms of nervous diseases; the ophthalmoscope is dwelt upon at some